



WORLD HEALTH ORGANIZATION

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Collaboration within the United Nations system and with other intergovernmental organizations

Follow-up of international conferences

1. This additional document provides details of WHO's role in the follow-up of international conferences.

FOLLOW-UP TO THE FOURTH WORLD CONFERENCE ON WOMEN – BEIJING +5

2. The Beijing Declaration and Platform for Action, which was adopted by consensus in 1995, reflects the commitment of the international community to the advancement of women. It agreed on a five-year action plan to enhance the social, economic and political empowerment of women, improve their health, advance their education and promote their marital and reproductive rights. The Platform for Action sets out time-specific targets, committing nations to actions in such areas as health, education and legislation.

3. Beijing +5, entitled "Women 2000: gender equality, development and peace for the twenty-first century", will be a special session of the United Nations General Assembly (5-9 June 2000). It will appraise and assess progress since the 1995 Fourth World Conference on Women (Beijing, 1995). It will focus on examples of good practice, positive actions, lessons learned, obstacles and key challenges remaining, and identify further actions and initiatives for achieving gender equality (General Assembly resolution 53/120). Heads of State, government and international organizations are expected to attend.

4. The Commission on the Status of Women, acting as the Preparatory Committee, will issue a political declaration at the special session to speed up the implementation of the critical areas of concern identified in the Beijing Platform for Action.

5. With respect to health, the Commission on the Status of Women at its forty-third session (1-19 March 1999, New York) reviewed, in the Platform for Action, the five strategic objectives set out in Section C: Women and Health, and recommended faster implementation. The objectives are:

- to increase women's access throughout the life cycle to appropriate, affordable and quality health care, information and related services;
- to strengthen preventive programmes that promote women's health;

- to undertake gender-sensitive initiatives that address sexually transmitted diseases, HIV/AIDS, and sexual and reproductive health issues;
- to promote research and disseminate information on women's health;
- to increase resources and monitor follow-up for women's health.

6. The Commission on the Status of Women also reconfirmed the targets identified in the Platform for Action and recommended efforts to implement them more rapidly.

7. The thematic areas on women's health highlighted in a draft resolution to be recommended by the Economic and Social Council for adoption by the General Assembly in June 2000 which are likely to be subjects of interest are as follows:

- maternal and essential obstetric care, including emergency care;
- elimination of sexual violence against women and girls;
- elimination of stigmatization and social exclusion surrounding infectious disease;
- preventive and remedial health services and the provision of appropriate counselling and treatment for mental disorders in women and girls;
- research into gender differences in the causes and effects of the use and abuse of substances, including narcotic drugs and alcohol;
- measures aimed at occupational and environmental health to protect women workers in all sectors and domestic households; and
- incorporation of a gender perspective into the curricula and training of all health care and service providers, and using the opportunity provided by health sector reform and development to integrate gender analysis systematically into health policies and programmes.

8. WHO was a key player in providing technical input on women and health at the Fourth World Conference on Women (Beijing, 1995) and subsequently in the review of the Women and Health Section of the Beijing Platform for Action by the Commission on the Status of Women.

9. WHO has reviewed and published a comprehensive report (*Beijing platform for action: a review of WHO's activities (related to the "Women and Health" Section)*, 1999) on the progress made to date within the Organization in the implementation of the Beijing Platform for Action. WHO has developed many technical guidelines relevant to women's health to make health systems and services more equitable, accessible and affordable to populations in need. The Organization has also assisted in defining health care problems and constraints on health systems through the application of assessment tools and instruments for setting priorities. These materials will be made available at the major events around the Beijing +5 special session.

10. As an essential contribution to the special session of the General Assembly, the United Nations Secretariat issued a questionnaire on implementation of the objectives set out in the Beijing Platform for Action. WHO is analysing the responses of Member States relating to the section on women and health. The outcome of this review will help to identify gaps in the implementation of policy and programmes to improve women's health.

11. WHO has adopted a policy on gender mainstreaming with the specific objective of ensuring that its policies, programmes and projects include an analysis of gender issues.

12. Underlying the Platform for Action is a life-cycle approach that calls for action to address the needs of women from infancy to old age, with special attention given to the girl child, one of the critical areas. WHO is developing a comprehensive policy outlining the women's health agenda and WHO's contribution to it that will serve in the long term as a major advocacy and programmatic tool.

FOLLOW-UP TO THE WORLD SUMMIT FOR SOCIAL DEVELOPMENT – COPENHAGEN +5

13. To follow up the World Summit for Social Development (Copenhagen, 1995), the United Nations General Assembly will hold a special session on Copenhagen +5 in Geneva, 26-30 June 2000. The "World Summit for Social Development and beyond: achieving social development for all in a globalizing world", the first General Assembly since 1945 to take place outside New York, is intended to give further impetus to implementation of the social development agenda.

14. Five years after the Social Summit in Copenhagen, progress in fulfilling the commitments is felt to have been disappointing. However, there has been a significant shift towards international consensus on human development, including recognition of the centrality of health – as a critical input to development, as an outcome of development which must be consciously pursued, and as a fundamental human right. There appears to be increasing recognition by governments and United Nations organizations of the potential of Copenhagen +5 to "remove the remaining roadblocks" to a new period of more enlightened development policy.

15. Health and education are likely to be key subjects within the central themes of poverty eradication, promoting full employment, and creating an environment conducive to development.

16. The expected outputs are: a political declaration; a review of progress since 1995; and agreement on a small number of new initiatives to accelerate social development. This agreement is obviously the key outcome.

17. The Swiss and Geneva governments not only will host the special session but are also sponsoring the Geneva 2000 Forum ("Geneva 2000: the next step in social development") which will bring together representatives of civil society for a parallel but connected dialogue.

18. The Copenhagen Declaration on Social Development and Programme of Action accorded responsibility for health to basic social services. This perception of health undervalues the contribution of improved health status of populations to development and the potential of many sectors to foster the health of poor people. Improved health status, rather than the output of health services, builds up human and social capital and hence sustainable livelihoods and human development.

19. Copenhagen +5 can set future development policy on a new, more effective track if good health status is recognized as one of the most important assets of the poor. WHO has proposed that the special session should recommend that the protection and improvement of health status of poor and vulnerable populations be adopted as a core strategy to be shared by all actors in the development process.

20. The Chairmen of both the Preparatory Committee and the United Nations Commission for Social Development are committed to facilitating a central position for health in Copenhagen +5.

21. WHO will hold a two-day orientation seminar in February 2000 in New York for governments on the contribution of health to poverty reduction.

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